

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Mooney for Congress

ADDRESS (number and street)

PO Box 1863

Check if different  
than previously  
reported. (ACC)

Martinsburg

WV

25402

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

C00506774

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

WV

02

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
10 / 01 / 2014

through

M M / D D / Y Y Y Y  
10 / 15 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Peter Onoszko

Signature of Treasurer

Peter Onoszko

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
10 / 22 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 67

Write or Type Committee Name

**Mooney for Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	86350.50	1701743.16
(b) Total Contribution Refunds (from Line 20(d)) .....	400.00	6900.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	85950.50	1694843.16
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	253318.60	1595317.67
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	253318.60	1595317.67
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	148305.47	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	9289.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 67

Write or Type Committee Name

**Mooney for Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

33806.00

1001425.87

**(ii) Unitemized .....**

14845.50

199316.24

**(iii) TOTAL of contributions from individuals .....**

48651.50

1200742.11

**(b) Political Party Committees.....**

999.00

2298.00

**(c) Other Political Committees (such as PACs) .....**

36700.00

498703.05

**(d) The Candidate .....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

86350.50

1701743.16

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

14040.16

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....**

86350.50

1715783.32

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 67

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	253318.60	1595317.67
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	2000.00	2000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	400.00	800.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	6100.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	400.00	6900.00
21. OTHER DISBURSEMENTS .....	0.00	500.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	255718.60	1604717.67

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	317673.57
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	86350.50
25. SUBTOTAL (add Line 23 and Line 24).....	404024.07
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	255718.60
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	148305.47

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

A. BRYANT APPLGATE

Mailing Address P.O. BOX 1074

City

SANFORD

State

FL

Zip Code

32772-1074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SEMINOLE COUNTY FLORIDA

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2014

Transaction ID : SA11.7978

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. HARVEY L. ARMSTRONG

Mailing Address 94 LA LOMA DR

City

MENLO PARK

State

CA

Zip Code

94025-6621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CTC-MYCFO, LLC

Occupation

FINANCIAL ADVISOR

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

541.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11.8416

Amount of Each Receipt this Period

541.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. BONNIE AULD

Mailing Address 4019 CALLE SONORA ESTE UNIT B

City

LAGUNA WOODS

State

CA

Zip Code

92637-3208

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : SA11.8162

Amount of Each Receipt this Period

70.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

861.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**JOHNNIE C. BAKER**

Mailing Address PO BOX 163

City

WRIGHTSVILLE BEACH

State

NC

Zip Code

28480-0163

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ENVIRONMENTAL CHEMISTS INC.

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8732

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BRIAN BELLMAN**

Mailing Address 109 EUCLID AVE

City

CHARLES TOWN

State

WV

Zip Code

25414-1111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FREDERICK CO MD BD OF ED.

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

429.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		11		2014

Transaction ID : SA11.8800

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**JANE BENEKE**

Mailing Address 4201 ARMSTRONG PKWY

City

DALLAS

State

TX

Zip Code

75205-3715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8218

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

425.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**ROBERT E. BLEDSOE**

Mailing Address S5240 DAMAR PRIVATE DR.

City

EAU CLAIRE

State

WI

Zip Code

54701-9974

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

436.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8711

Amount of Each Receipt this Period

131.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**ROBERT E. BLEDSOE**

Mailing Address S5240 DAMAR PRIVATE DR.

City

EAU CLAIRE

State

WI

Zip Code

54701-9974

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

436.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8826

Amount of Each Receipt this Period

40.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**HOWARD BOWEN**

Mailing Address 9651 OLD NATIONAL PIKE

City

HAGERSTOWN

State

MD

Zip Code

21740-1553

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EWING OIL COMPANY

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8818

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

671.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**ERNEST R. BURROUGHS****A.**

Mailing Address 156 PISGAH RIDGE RD.

City

CLAY

State

WV

Zip Code

25043-8400

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

206.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

**Transaction ID : SA11.8764**

Amount of Each Receipt this Period

51.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**ORLANDO CABRERA****B.**

Mailing Address 1865 BRICKELL AVE. APT. A2003

City

MIAMI

State

FL

Zip Code

33129-1652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

DOCTOR

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

**Transaction ID : SA11.8713**

Amount of Each Receipt this Period

35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**EARL CALDWELL****C.**

Mailing Address 172 N PLAZA CT

City

MT PLEASANT

State

SC

Zip Code

29464-6301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

APR

Occupation

CFO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2014

**Transaction ID : SA11.8074**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

186.00
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

 Full Name (Last, First, Middle Initial)  
**JOSEPH M. CARSON JR.**

Mailing Address 101 WALNUT AVE.

City	State	Zip Code
SAINT CLAIRSVILLE	OH	43950-1702

 FEC ID number of contributing  
 federal political committee.

 Name of Employer  
 RETIRED

 Occupation  
 RETIRED

 Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8807

Amount of Each Receipt this Period

CONTRIBUTION

 Full Name (Last, First, Middle Initial)  
**WADE CASKEY SR.**

Mailing Address 1569 NOTTINGHAM RD.

City	State	Zip Code
CHARLESTON	WV	25314-2454

 FEC ID number of contributing  
 federal political committee.

 Name of Employer  
 SELF

 Occupation  
 TEACHER

 Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

Transaction ID : SA11.8858

Amount of Each Receipt this Period

CONTRIBUTION

 Full Name (Last, First, Middle Initial)  
**JAMES W. COOPER**

Mailing Address 122 LUNDQUIST RD.

City	State	Zip Code
LIQONIER	PA	15658-2133

 FEC ID number of contributing  
 federal political committee.

 Name of Employer  
 INFORMATION REQUESTED PER BEST EFFC

 Occupation  
 INFORMATION REQUESTED PER BEST EFFC

 Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8225

Amount of Each Receipt this Period

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

DAVID E. CORY

A.

Mailing Address 3718 N WILLIAMS

City

OKLAHOMA CITY

State

OK

Zip Code

73112-2939

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11.8152

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ALICE CROSS

B.

Mailing Address 99 CROSS LN.

City

MOOREFIELD

State

WV

Zip Code

26836-8355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8835

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN C. DAVISON

C.

Mailing Address 1233 W. MOUNT ROYAL AVE.

City

BALTIMORE

State

MD

Zip Code

21217-4176

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MOUNT ROYAL MANAGEMENT COMPANY

Occupation

PARTNER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8834

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

625.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**RANDY DEAN**

Mailing Address 3112 WHEATON WAY, APT I

City

ELLICOTT CITY

State

MD

Zip Code

21043-4455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JOHNS HOPKINS UNIVERSITY APL

Occupation

ENGINEER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2014

Transaction ID : SA11.8050

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**RANDY DEAN**

Mailing Address 3112 WHEATON WAY, APT I

City

ELLICOTT CITY

State

MD

Zip Code

21043-4455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JOHNS HOPKINS UNIVERSITY APL

Occupation

ENGINEER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11.8251

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**ANTOINETTE P. DIEMER**

Mailing Address 10919 MAIDEN DR.

City

BOWIE

State

MD

Zip Code

20720-3599

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8709

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**JAMES DOLAN**

Mailing Address 1001 LIBERTY AVE., SUITE 850

City

PITTSBURGH

State

PA

Zip Code

15222-3718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VOYAGER GROUP HOLDINGSOccupation  
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11.8147

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MARK ELLIS**

Mailing Address P.O. BOX 2165

City

WHITE SALMON

State

WA

Zip Code

98672-2165

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PLAN 9, INC.Occupation  
MANUFACTURER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11.8623

Amount of Each Receipt this Period

55.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**JUDITH ENFIELD**

Mailing Address 4227 NANCY PL

City

SHOREVIEW

State

MN

Zip Code

55126-6413

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VALERE,LLCOccupation  
PROGRAMMER ANALYST

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11.8624

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1075.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 67

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

A. Full Name (Last, First, Middle Initial)  
**JOSEPH FIALKOWSKI**

Mailing Address **516 CLAYTON ROAD**

City State Zip Code  
**WILLIAMSTOWN NJ 08094-3528**

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**SELF EMPLOYED**Occupation  
**IT FIELD**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**389.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

**Transaction ID : SA11.8135**

Amount of Each Receipt this Period

**190.00**

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**LAWRENCE FIELD**

Mailing Address **433 N CAMDEN DR, #820**

City State Zip Code  
**BEVERLY HILLS CA 90210-4412**

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**NSB ASSOCIATES, INC.**Occupation  
**REAL ESTATE**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**5200.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

**Transaction ID : SA11.8186**

Amount of Each Receipt this Period

**600.00**

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**BETTY GARDNER**

Mailing Address **1572 GOODIN HOLLOW RD.**

City State Zip Code  
**NOEL MO 64854-7235**

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**RETIRED**Occupation  
**RETIRED**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**655.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

**Transaction ID : SA11.8751**

Amount of Each Receipt this Period

**50.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....**840.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

A. Full Name (Last, First, Middle Initial)  
**IRWIN W. GEBHARDT**

Mailing Address 4328 ARTHUR SHIPLEY RD.

City	State	Zip Code
WESTMINSTER	MD	21157-8204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 RETIRED

Occupation  
 RETIRED

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8778

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)

**MR. ROBERT GERHARD**

Mailing Address 331 WINDING WWAY

City	State	Zip Code
GLENSIDE	PA	19038-2114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

272.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11.8138

Amount of Each Receipt this Period

70.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)

**MR. ROBERT GERHARD**

Mailing Address 331 WINDING WWAY

City	State	Zip Code
GLENSIDE	PA	19038-2114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

272.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8805

Amount of Each Receipt this Period

40.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

210.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**Full Name (Last, First, Middle Initial)  
**LORNA GLADSTONE**

A. Mailing Address 1161 CREST LANE

City	State	Zip Code
MCLEAN	VA	22101-1805

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8820

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. KATHY HANSEN**

Mailing Address 1909 SANDY LAKE DR

City	State	Zip Code
FRIENDSWOOD	TX	77546-6136

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
YOUR FAMILY DOKTOROccupation  
PHYSICIAN

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : SA11.8281

Amount of Each Receipt this Period

52.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. DAVID HARTY**

Mailing Address 198 PRIDES CROSSIGN

City	State	Zip Code
SHENANDOAH JCT	WV	25442-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NORTHRUP GRUMMANOccupation  
ENGINEER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

Transaction ID : SA11.8164

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

352.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**WALT HELMERICH III**

Mailing Address 2121 S. YORKTOWN

City

TULSA

State

OK

Zip Code

74114-1426

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : SA11.8161

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**ROBERTA HILLMAN**

Mailing Address 504 W BLEEKER ST.

City

ASPEN

State

CO

Zip Code

81611-1228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA11.8262

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**TATNALL HILLMAN**

Mailing Address 504 W BLEEKER ST

City

ASPEN

State

CO

Zip Code

81611-1228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA11.8188

Amount of Each Receipt this Period

1600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2850.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**BRUCE HOFFMAN**

Mailing Address 13024 SALEM AVE.

City  
**HAGERSTOWN**

State Zip Code  
**MD 21740-3550**

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 INFORMATION REQUESTED PER BEST EFF

Occupation  
 INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**260.00**

Date of Receipt

**10 / 13 / 2014**

Transaction ID : SA11.8239

Amount of Each Receipt this Period

**75.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**DONALD HOFFMAN**

Mailing Address 11921 ROCKVILLE PIKE

City  
**ROCKVILLE**

State Zip Code  
**MD 20852-2737**

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 CEO

Occupation  
 EXCEL SERVICES

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**1000.00**

Date of Receipt

**10 / 02 / 2014**

Transaction ID : SA11.7939

Amount of Each Receipt this Period

**1000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BILL HOLDEN**

Mailing Address 4467 PLANTATION DR.

City  
**FAIR OAKS**

State Zip Code  
**CA 95628-5638**

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 STATE OF CALIFORNIA

Occupation  
 INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**300.00**

Date of Receipt

**10 / 12 / 2014**

Transaction ID : SA11.8755

Amount of Each Receipt this Period

**200.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1275.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**WILLIAM HOTALING**

Mailing Address 125 QUASSAICK AVE

City

NEW WINDSOR

State

NY

Zip Code

12553-6635

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11.8302

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**ORVILLE R. HUGHES**

Mailing Address 3936 STANSBURY MILL RD.

City

MONKTON

State

MD

Zip Code

21111-2518

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

351.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8231

Amount of Each Receipt this Period

51.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**PETER J. JACKSON**

Mailing Address 5630 DYER ST.

City

DALLAS

State

TX

Zip Code

75206-5004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

REAL ESTATE

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2014

Transaction ID : SA11.8790

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

851.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**ANN L. JOHNSON**

Mailing Address 703 ISLAND DR.

City

PALM BEACH

State

FL

Zip Code

33480-4742

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8786

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**ANN L. JOHNSON**

Mailing Address 703 ISLAND DR.

City

PALM BEACH

State

FL

Zip Code

33480-4742

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8787

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**CHARLES B. JOHNSON**

Mailing Address 703 ISLAND DR.

City

PALM BEACH

State

FL

Zip Code

33480-4742

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FRANKLIN INVESTMENTS

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8784

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7800.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 20 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

CHARLES B. JOHNSON

A.

Mailing Address 703 ISLAND DR.

City

PALM BEACH

State

FL

Zip Code

33480-4742

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FRANKLIN INVESTMENTS

Occupation

CEO

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8785

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DAVID JOHNSTON

B.

Mailing Address P.O. BOX 1457

City

TULARE

State

CA

Zip Code

93275-1457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAS

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : SA11.8402

Amount of Each Receipt this Period

22.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DAVID JOHNSTON

C.

Mailing Address P.O. BOX 1457

City

TULARE

State

CA

Zip Code

93275-1457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAS

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : SA11.8403

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

2647.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 21 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**Full Name (Last, First, Middle Initial)  
**A. JIM JOHNSON**

Mailing Address P.O. BOX 1144

City	State	Zip Code
TROY	MT	59935-1144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHLOR RIDOccupation  
MARKETING

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

578.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : SA11.8401

Amount of Each Receipt this Period

207.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT JOHNSTON**

Mailing Address 1550 MT. ALPHA RD

City	State	Zip Code
CHARLESTON	WV	25304-2729

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RIVER TRADING CO.Occupation  
MANAGER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8234

Amount of Each Receipt this Period

600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. DEE JORGENSEN**

Mailing Address 149 W 400 N

City	State	Zip Code
BLACKFOOT	ID	83221-5763

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : SA11.8405

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

907.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**MR. BARRY R. KATZ**

Mailing Address 699 WEST 239TH ST. 4-U

City

BRONX

State

NY

Zip Code

10463-1246

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8812

Amount of Each Receipt this Period

30.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**SUSAN KOTTA**

Mailing Address 33 LITTLEWORTH LN.

City

SEA CLIFF

State

NY

Zip Code

11579-1832

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : SA11.8169

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**SUSAN KOTTA**

Mailing Address 33 LITTLEWORTH LN.

City

SEA CLIFF

State

NY

Zip Code

11579-1832

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8745

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

330.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**MR. BOB LAWRENCE**

Mailing Address 1610 N SALISBURY BLVD.

City

SALISBURY

State

MD

Zip Code

21801-3329

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1032.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8823

Amount of Each Receipt this Period

35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**KELLY LEONARD**

Mailing Address P.O. BOX 332

City

MIDLAND

State

TX

Zip Code

79702-0332

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF

Occupation

LANDMAN

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2014

Transaction ID : SA11.8098

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**CONSTANTINE LIZAS**

Mailing Address 4909 45TH STREET NW

City

WASHINGTON

State

DC

Zip Code

20016-4040

FEC ID number of contributing federal political committee.

C

Name of Employer

US GOVERNMENT

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11.8134

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

535.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**W. TIMOTHY LOCKE**

Mailing Address 2111 WOODMONT ROAD

City

ALEXANDRIA

State

VA

Zip Code

22307-1156

FEC ID number of contributing federal political committee.

C

Name of Employer

THE SMITH-FREE GROUP

Occupation

GOVERNMENT AFFAIRS CONSULTANT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : SA11.7938

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**PATRICK MALLOY**

Mailing Address 9440 NEWBRIDGE DRIVE

City

POTOMAC

State

MD

Zip Code

20854-4467

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : SA11.8158

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**ERIC G. MANSFIELD**

Mailing Address 8910 MOUNTAIN VALLEY RD

City

FAIRFAX STATION

State

VA

Zip Code

22039-2805

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8842

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

530.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 25 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**WILLIAM J. MCDERMOTT**

Mailing Address 395 N FOREST RD.

City

WILLIAMSVILLE

State

NY

Zip Code

14221-5034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8780

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. KIRK A. MOONEY**

Mailing Address 3891 WEBB RD

City

RAVENNA

State

OH

Zip Code

44266-9748

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAVAGE-SIMPSON REALTY

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8845

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**GERALD T. MOORE**

Mailing Address 74 MOORES DR.

City

TRIADELPHIA

State

WV

Zip Code

26059-2139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

254.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8808

Amount of Each Receipt this Period

129.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

429.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 26 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

A. Full Name (Last, First, Middle Initial)  
**GERALD D MORGAN**

Mailing Address P.O. BOX 12

City	State	Zip Code
VIDA	OR	97488-0012

FEC ID number of contributing federal political committee.

C

Name of Employer  
 RETIRED

Occupation  
 RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 10 15 2014

Transaction ID : SA11.8691

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**FRANCIS MORSE**

Mailing Address 4181 FORT JIM RD.

City	State	Zip Code
PLACERVILLE	CA	95667-9024

FEC ID number of contributing federal political committee.

C

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

440.00

Date of Receipt

M M / D D / Y Y Y Y  
 10 12 2014

Transaction ID : SA11.8811

Amount of Each Receipt this Period

50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**LINDA S. NAYLOR**

Mailing Address PO BOX 348

City	State	Zip Code
BRADDOCK HEIGHTS	MD	21714-0348

FEC ID number of contributing federal political committee.

C

Name of Employer  
 RETIRED

Occupation  
 RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 10 12 2014

Transaction ID : SA11.8822

Amount of Each Receipt this Period

50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)  
**MR. RAYMOND NICHOLS**

Mailing Address P.O. BOX 516

City	State	Zip Code
BEL AIR	MD	21014-0516

FEC ID number of contributing federal political committee.

C

Name of Employer  
 BSC AMERICA

Occupation  
 EXECUTIVE

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8233

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**GEORGE S. OLIVER**

Mailing Address PO BOX 373

City	State	Zip Code
CENTER POINT	TX	78010-0373

FEC ID number of contributing federal political committee.

C

Name of Employer  
 RETIRED

Occupation  
 RETIRED

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		11		2014

Transaction ID : SA11.8795

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**NELSON L. PAYNE**

Mailing Address 37119 SABER CT.

City	State	Zip Code
GREENBACKVILLE	VA	23356-2617

FEC ID number of contributing federal political committee.

C

Name of Employer  
 INFORMATION REQUESTED PER BEST EFFC

Occupation  
 INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8825

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

225.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 28 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**JOHN PECK****A.**

Mailing Address P.O. BOX 829

City

RANCHO SANTA FE

State

CA

Zip Code

92067-0829

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PECK ENTERPRISES

Occupation

REAL ESTATE OWNER/OPERATOR

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2014

**Transaction ID : SA11.8109**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**TIM PHILLIPS****B.**

Mailing Address 438 VALLEY VIEW DR

City

WINTER GARDEN

State

FL

Zip Code

34787-4512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CERTI-FINE FRUIT

Occupation

CITRUS GROWER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

457.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

**Transaction ID : SA11.8337**

Amount of Each Receipt this Period

207.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MICHAEL PILLSBURY****C.**

Mailing Address 3017 O ST NW

City

WASHINGTON

State

DC

Zip Code

20007-3108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

POLITICAL SCIENTIST

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2014

**Transaction ID : SA11.8241**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

2207.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 29 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

JORGE PINO

A.

Mailing Address 170 OCEAN LN APT 306

City

KEY BISCAWAYNE

State

FL

Zip Code

33149-1449

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8741

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PETER PLAMONDON

B.

Mailing Address 13903 CARLSON FARM DR

City

GERMANTOWN

State

MD

Zip Code

20874-4481

FEC ID number of contributing federal political committee.

C

Name of Employer

PLAMONDON COMPANY

Occupation

BOARD CHAIRMAN

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : SA11.8167

Amount of Each Receipt this Period

750.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROBERT POLIN

C.

Mailing Address 4602 HIGHLAND AVE

City

BETHESDA

State

MD

Zip Code

20814-3604

FEC ID number of contributing federal political committee.

C

Name of Employer

FISH AND WILDLIFE FOUNDATION

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11.8136

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 30 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**CLAIRE RAINS**

Mailing Address 420 41ST. AVE.

City

SAN FRANCISCO

State

CA

Zip Code

94121-1512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

545.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8739

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**TERESA A. REGARD**

Mailing Address 720 E CHERRY LN

City

ARLINGTON HTS

State

IL

Zip Code

60004-3217

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8762

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**NORMAN ROGERS**

Mailing Address 3750 LAS VEGAS BLVD S UNIT 3507

City

LAS VEGAS

State

NV

Zip Code

89158-4368

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11.8353

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 31 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**JAMES SAMMONS**

Mailing Address 1000 RIVER RANCH RD

City

ALEDO

State

TX

Zip Code

76008-4841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

REAL ESTATE

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2014

Transaction ID : SA11.8114

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**WILLIAM M. SANDEFUR**

Mailing Address 660 E CHARLES ST.

City

BATESVILLE

State

AR

Zip Code

72501-2906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

ADJUNCT COLLEGE INSTRUCTOR

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11.8149

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MS. EVA F. SCOTT**

Mailing Address 15830 GOODES BRIDGE RD

City

AMELIA COURT HOUSE

State

VA

Zip Code

23002-4717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

635.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA11.8190

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 32 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**JOHN SEAL**

Mailing Address 514 VIA DE FORTUNA WAY

City

MESQUITE

State

NV

Zip Code

89027-7608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8740

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**PETER SHEAFFER**

Mailing Address PO BOX 28

City

CENTREVILLE

State

MD

Zip Code

21617-0028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

FARMER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8773

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. TIMOTHY SMITH**

Mailing Address 108 ROLLING RD

City

GAITHERSBURG

State

MD

Zip Code

20877-2044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

U.S. NAVY

Occupation

ENGINEER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8779

Amount of Each Receipt this Period

175.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

475.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 33 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**WILLIAM STEWART**

Mailing Address P.O. BOX 159

City

STEVENSON

State

MD

Zip Code

21153-0159

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ASSET STRATEGY CONSULTANTS

Occupation

INVESTMRNT CONSULTING

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8229

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**JEAN A. STUMBAUGH**

Mailing Address 7623 HAYFIELD RD.

City

ALEXANDRIA

State

VA

Zip Code

22315-4034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8843

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**KIM UTLEY**

Mailing Address 205 DORIS DR

City

LUCAS

State

TX

Zip Code

75002-1411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SIMS

Occupation

PROGRAMMER

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11.8472

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 34 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**KIM UTLEY**

Mailing Address 205 DORIS DR

City

LUCAS

State

TX

Zip Code

75002-1411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SIMS

Occupation

PROGRAMMER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : SA11.8672

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**JOHN B. VALERIUS**

Mailing Address 1909 CANTERBURY ST.

City

IRVING

State

TX

Zip Code

75062-3551

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8841

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**LAZARA V. VALLE**

Mailing Address 2634 INVWOOD DR

City

ADAMSTOWN

State

MD

Zip Code

21710-9467

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8829

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

280.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 35 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**RAFAEL VALLE**

Mailing Address 2634 INWOOD DR

City

ADAMSTOWN

State

MD

Zip Code

21710-9467

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ACCOUNTANT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : SA11.8036

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. JOHN M. VOLKHARDT**

Mailing Address 84 TOPPIN DR.

City

HILTON HEAD ISLAND

State

SC

Zip Code

29926-1025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

Transaction ID : SA11.8758

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**LOUIS WEISBERG**

Mailing Address 3 CHATSWORTH LANE

City

CHARLESTON

State

WV

Zip Code

25314-1571

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SERVICE WIRE

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8717

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

625.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 36 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. GLENDA BRACKEN WILLIAMS

Mailing Address 3420 BLACKBURN ST.

City

DALLAS

State

TX

Zip Code

75219-4434

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11.8146

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. LOWELL T. WILLIAMS

Mailing Address 106 ELLIS AVE.

City

ELKINS

State

WV

Zip Code

26241-3223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : SA11.8033

Amount of Each Receipt this Period

70.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. ANTHONY WISNIEWSKI

Mailing Address 312 SEVERN AVENUE #W411

City

ANNAPOLIS

State

MD

Zip Code

21403-2576

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ADVANTA GOVERNMENT SERVICES, LLC

Occupation

EXECUTIVE DIRECTOR &amp; COUNSEL

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA11.8197

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

570.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 37 OF 67

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**PAUL F. WOODBERRY****A.**

Mailing Address P.O. BOX 31043

City

SEA ISLAND

State

GA

Zip Code

31561-1043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BF ENTERPRISES INC.Occupation  
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

**Transaction ID : SA11.8716**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MARIE S. WUBBENA****B.**

Mailing Address 3607 SPRUELL DR

City

SILVER SPRING

State

MD

Zip Code

20902-2366

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2014

**Transaction ID : SA11.8782**

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

525.00

33806.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 OF 67

☐ 11a ☒ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)  
**HOUGH FOR SENATE**

Mailing Address 326 W POTOMAC ST.

City State Zip Code  
BRUNSWICK MD 21716-1136

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

999.00

Date of Receipt

M M / D D / Y Y Y Y  
10 13 2014

Transaction ID : SA11.8223

Amount of Each Receipt this Period

999.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

999.00

999.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 39 OF 67

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**BUCK FOR COLORADO**

Mailing Address PO BOX 338018

City

GREELEY

State

CO

Zip Code

80633-0634

FEC ID number of contributing  
federal political committee.

C C00461368

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8718

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**LOUDERMILK FOR CONGRESS**

Mailing Address P.O. BOX 447

City

CASSVILLE

State

GA

Zip Code

30123-0447

FEC ID number of contributing  
federal political committee.

C C00543892

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8227

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BAMPAC**

Mailing Address 1325 G STREET, NW

City

WASHINGTON

State

DC

Zip Code

20005-3104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8235

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

2250.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 OF 67

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)  
**CONSERVATIVE OPPORTUNITY LEADERSHIP & ENTERPRISE (COLE PAC)**

Mailing Address 12176 CHANCERY STATION CIR.

City State Zip Code  
RESTON VA 20190-5803

FEC ID number of contributing  
federal political committee.

**C** C00404392

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 13 2014

Transaction ID : SA11.8722

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**FREE MARKETS PAC, INC.**

Mailing Address PO BOX 11207

City State Zip Code  
CHARLOTTE NC 28220-1207

FEC ID number of contributing  
federal political committee.

**C** C00527531

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3250.00

Date of Receipt

M M / D D / Y Y Y Y  
10 12 2014

Transaction ID : SA11.8819

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**FREEDOM AND SECURITY PAC**

Mailing Address 228 S. WASHINGTON ST. STE. 115

City State Zip Code  
ALEXANDRIA VA 22314-5404

FEC ID number of contributing  
federal political committee.

**C** C00437061

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 08 2014

Transaction ID : SA11.8145

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 67

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**FREEDOM FUND**

Mailing Address 701 8TH STREET NW, SUITE 500

City

WASHINGTON

State

DC

Zip Code

20001-3965

FEC ID number of contributing  
federal political committee.**C** C00401786

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8707

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**JBS USA, INC. PAC**

Mailing Address 1770 PROMONTORY CIR

City

GREELEY

State

CO

Zip Code

80634-9039

FEC ID number of contributing  
federal political committee.**C** C00394650

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8723

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**JOHN BOLTON PAC**

Mailing Address C/O 610 S. BOULEVARD

City

TAMPA

State

FL

Zip Code

33606-

FEC ID number of contributing  
federal political committee.**C** C00542431

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8720

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

8000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 OF 67

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN BOLTON PAC**  
 Mailing Address **C/O 610 S. BOULEVARD**

City State Zip Code  
**TAMPA FL 33606-**

FEC ID number of contributing  
federal political committee.

**C** **C00542431**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**10000.00**

Date of Receipt

**10 / 13 / 2014**

**Transaction ID : SA11.8721**

Amount of Each Receipt this Period

**5000.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MORE CONSERVATIVES PAC (MCPAC)**  
 Mailing Address **228 S. WASHINGTON ST. STE. 115**

City State Zip Code  
**ALEXANDRIA VA 22314-5404**

FEC ID number of contributing  
federal political committee.

**C** **C00540187**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**3000.00**

Date of Receipt

**10 / 13 / 2014**

**Transaction ID : SA11.8724**

Amount of Each Receipt this Period

**2000.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. SMITH PAC**  
 Mailing Address **PO BOX 30844**

City State Zip Code  
**BETHESDA MD 20824-0844**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**1000.00**

Date of Receipt

**10 / 13 / 2014**

**Transaction ID : SA11.8219**

Amount of Each Receipt this Period

**1000.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**8000.00**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 43 OF 67

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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 NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS**

Mailing Address 1325 G STREET NW, SUITE 1000

City  
WASHINGTONState  
DCZip Code  
20005-3134FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

Transaction ID : SA11.8183

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**NRA-POLITICAL VICTORY FUND**

Mailing Address 11250 WAPLES MILL RD.

City  
FAIRFAXState  
VAZip Code  
22030-7400FEC ID number of contributing  
federal political committee.

C C00053553

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8719

Amount of Each Receipt this Period

2450.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**REPUBLICAN JEWISH COALITION PAC**

Mailing Address 50 F STREET NW, SUITE100

City  
WASHINGTONState  
DCZip Code  
20001-1590FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

Transaction ID : SA11.8163

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5950.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 44 OF 67

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**THE COMMITTEE FOR THE PRESERVATION OF CAPITALISM (CPC-PAC)**

A.

Mailing Address PO BOX 65314

City

WASHINGTON

State

DC

Zip Code

20035-5314

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8222

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**UNION PACIFIC CORPORATION FUND FOR EFFECTIVE GOVERNMENT**

B.

Mailing Address 700 13TH ST. NW SUITE 350

City

WASHINGTON

State

DC

Zip Code

20005-3960

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

Transaction ID : SA11.8181

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**WESTING HOUSE ELECTRIC COMPANY PAC**

C.

Mailing Address 900 19TH STREET NW, SUITE 350

City

WASHINGTON

State

DC

Zip Code

20006-2125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2014

Transaction ID : SA11.8224

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8000.00

36700.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 45 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. WADE CASKEY SR.**

Mailing Address 1569 NOTTINGHAM RD.

City	State	Zip Code
CHARLESTON	WV	25314-2454

Purpose of Disbursement  
IN-KIND CONTRIBUTION

Candidate Name

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
10 / 14 / 2014

Amount of Each Disbursement this Period

800.00
--------

Transaction ID : SB17.8858

**B. NICK CLEMENS**

Mailing Address PO BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
10 / 01 / 2014

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : SB17.I644

**C. NICK CLEMENS**

Mailing Address PO BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
REIMBURSEMENT

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
10 / 04 / 2014

Amount of Each Disbursement this Period

529.46
--------

Transaction ID : SB17.I652

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4329.46

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 46 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. STEPHANIE COOPER**

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

1500.00
---------

Transaction ID : SB17.I645

**B. STEPHANIE COOPER**

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

422.51
--------

Transaction ID : SB17.I665

**C. EDWARD DACEY**

Mailing Address 1114A KANAWHA AVE.

City	State	Zip Code
DUNBAR	WV	25064

Purpose of Disbursement  
REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		04		2014

Amount of Each Disbursement this Period

770.12
--------

Transaction ID : SB17.I656

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2692.63

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. MR. RAINER KISSEL**

Mailing Address 749 NADENBOUSCH LN.

City	State	Zip Code
MARTINSBURG	WV	25403

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2014

Amount of Each Disbursement this Period

650.00
--------

Transaction ID : SB17.I663

**B. MR. RAINER KISSEL**

Mailing Address 749 NADENBOUSCH LN.

City	State	Zip Code
MARTINSBURG	WV	25403

Purpose of Disbursement  
REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2014

Amount of Each Disbursement this Period

469.13
--------

Transaction ID : SB17.I664

**C. ELIJAH O'KELLY**

Mailing Address PO BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		04		2014

Amount of Each Disbursement this Period

91.99
-------

Transaction ID : SB17.I651

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1211.12

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. ADP, LLC**

Mailing Address ONE ADP DR., MS-100

City	State	Zip Code
AUGUSTA	GA	30909

Purpose of Disbursement  
PAYROLL SVC FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		12		2014

Amount of Each Disbursement this Period

87.45
-------

Transaction ID : SB17.I616

**B. ADP, LLC**

Mailing Address ONE ADP DR., MS-100

City	State	Zip Code
AUGUSTA	GA	30909

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

774.52
--------

Transaction ID : SB17.I674

**c. ADP, LLC**

Mailing Address ONE ADP DR., MS-100

City	State	Zip Code
AUGUSTA	GA	30909

Purpose of Disbursement  
PAYROLL SVC

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

2276.61
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Transaction ID : SB17.I675

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3138.58



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address PO BOX 53852

City	State	Zip Code
PHOENIX	AZ	85072

Purpose of Disbursement  
CREDIT CARD FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

7.95
------

Transaction ID : SB17.I643

**B. AMERICAN EXPRESS**

Mailing Address PO BOX 53852

City	State	Zip Code
PHOENIX	AZ	85072

Purpose of Disbursement  
CREDIT CARD FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

7.95
------

Transaction ID : SB17.I683

**C. AMERICAN EXPRESS**

Mailing Address PO BOX 53852

City	State	Zip Code
PHOENIX	AZ	85072

Purpose of Disbursement  
CREDIT CARD FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

264.61
--------

Transaction ID : SB17.I684

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

280.51

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 50 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. BANK OF CHARLES TOWN**

Mailing Address P.O. BOX 906

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

778.02
--------

Transaction ID : SB17.I693

**B. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

555.04
--------

Transaction ID : SB17.I642

**C. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

202.98
--------

Transaction ID : SB17.I685

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

778.02

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

4.84
------

Purpose of Disbursement  
CREDIT CARD FEESCategory/  
Type

Transaction ID : SB17.I695

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

320.46
--------

Purpose of Disbursement  
CREDIT CARD PROCESSING FEECategory/  
Type

Transaction ID : SB17.I697

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. COMCAST**

Mailing Address 302 N MILDRED ST.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

City	State	Zip Code
RANSON	WV	25438

Amount of Each Disbursement this Period

189.55
--------

Purpose of Disbursement  
UTILITIESCategory/  
Type

Transaction ID : SB17.I660

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

514.85

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. COURTYARD BY MARRIOTT**

Mailing Address 450 CHERRINGTON PKWY

City	State	Zip Code
CORAOPOLIS	PA	15108

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

135.00
--------

Transaction ID : SB17.I517

**B. DOMINO'S PIZZA**

Mailing Address 201 N MILDRED ST.

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

34.66
-------

Transaction ID : SB17.I679

**C. DOMINO'S PIZZA**

Mailing Address 201 N MILDRED ST.

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

Amount of Each Disbursement this Period

60.36
-------

Transaction ID : SB17.I689

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

230.02

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. DOMINO'S PIZZA**

Mailing Address 201 N MILDRED ST.

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

82.20
-------

Transaction ID : SB17.I692

**B. DUNBAR PRINTING & GRAPHICS**

Mailing Address 1310 OHIO AVE.

City	State	Zip Code
DUNBAR	WV	25064

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

3471.43
---------

Transaction ID : SB17.I649

**C. FLAME CAMPAIGNS**

Mailing Address 121 S ORANGE AVE STE 1430A

City	State	Zip Code
ORLANDO	FL	32801

Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

90.00
-------

Transaction ID : SB17.I680

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3643.63

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. FRONTIER COMMUNICATIONS**

Mailing Address 1398 S. WOODLAND BLVD. SUITE B

City	State	Zip Code
DELAND	FL	32720

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		04		2014

Amount of Each Disbursement this Period

959.33
--------

Transaction ID : SB17.I654

**B. FRONTIER COMMUNICATIONS**

Mailing Address 1398 S. WOODLAND BLVD. SUITE B

City	State	Zip Code
DELAND	FL	32720

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		04		2014

Amount of Each Disbursement this Period

59.88
-------

Transaction ID : SB17.I658

**C. HOLIDAY INN EXPRESS**

Mailing Address MARTIN ST.

City	State	Zip Code
ELKINS	WV	26241

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

Amount of Each Disbursement this Period

860.28
--------

Transaction ID : SB17.I687

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

959.33

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. JAM PAPER & ENVELOPE**

Mailing Address 185 LEGRAND AVE.

City	State	Zip Code
NORTHRAL	NJ	07647

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

672.14
--------

Transaction ID : SB17.I677

**B. JAM PAPER & ENVELOPE**

Mailing Address 185 LEGRAND AVE.

City	State	Zip Code
NORTHRAL	NJ	07647

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

Amount of Each Disbursement this Period

232.45
--------

Transaction ID : SB17.I688

**C. MAYS COUNTRY STORE**

Mailing Address 3753 CHARLESTON RD.

City	State	Zip Code
GANDEEVILLE	WV	25243

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

Amount of Each Disbursement this Period

50.00
-------

Transaction ID : SB17.I690

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

954.59

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 56 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. MDI IMAGING & MAIL**

Mailing Address 21955 CASCADES PKWY

City	State	Zip Code
DULLES	VA	20166

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

6018.30
---------

Transaction ID : SB17.I671

**B. PANHANDLE PRINTING & DESIGN**

Mailing Address 124 N MAPLE AVE.

City	State	Zip Code
MARTINSBURG	WV	25401

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

Amount of Each Disbursement this Period

498.20
--------

Transaction ID : SB17.I646

**C. PANHANDLE PRINTING & DESIGN**

Mailing Address 124 N MAPLE AVE.

City	State	Zip Code
MARTINSBURG	WV	25401

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2014

Amount of Each Disbursement this Period

179.50
--------

Transaction ID : SB17.I668

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6696.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. POLITICAL EQUITY CONSULTING**

Mailing Address 3213 DUKE ST. #685

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

Amount of Each Disbursement this Period

10838.56
----------

Transaction ID : SB17.I647

**B. PRINTING PRODUCTIONS INC.**

Mailing Address 1333 - E SHEPHERD DR.

City	State	Zip Code
STERLING	VA	20164

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

1460.00
---------

Transaction ID : SB17.I673

**C. PUBLIC OPINION STRATEGIES, LLC**

Mailing Address 214 NORTH FAYETTE ST.

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
SURVEY RESEARCH

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

6500.00
---------

Transaction ID : SB17.I662

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

18798.56

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. SHARP TUSK LLC**

Mailing Address 107 S WEST ST.

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

9500.00
---------

Transaction ID : SB17.I696

**B. SHELL**

Mailing Address 419 VIRGINIA AVE.

City	State	Zip Code
PETERSBURG	WV	26847

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

67.69
-------

Transaction ID : SB17.I682

**C. STAPLES**

Mailing Address 160 PATRICK HENRY WAY

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2014

Amount of Each Disbursement this Period

180.55
--------

Transaction ID : SB17.I669

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9748.24

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. STAPLES**

Mailing Address 160 PATRICK HENRY WAY

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		11		2014

Amount of Each Disbursement this Period

62871.47
----------

Transaction ID : SB17.I670

**B. STAPLES**

Mailing Address 160 PATRICK HENRY WAY

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

Amount of Each Disbursement this Period

305.72
--------

Transaction ID : SB17.I678

**C. STRATEGIC MEDIA PLACEMENT**

Mailing Address 7669 STAGERS LOOP

City	State	Zip Code
DELEWARE	OH	43015

Purpose of Disbursement  
MEDIA

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2014

Amount of Each Disbursement this Period

62437.50
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Transaction ID : SB17.I672

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

62871.47

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. STRATEGIC MEDIA PLACEMENT**

Mailing Address 7669 STAGERS LOOP

City	State	Zip Code
DELEWARE	OH	43015

Purpose of Disbursement  
MEDIA

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 06 / 2014

Amount of Each Disbursement this Period

76497.50
----------

Transaction ID : SB17.I681

**B. STRATEGIC MEDIA PLACEMENT**

Mailing Address 7669 STAGERS LOOP

City	State	Zip Code
DELEWARE	OH	43015

Purpose of Disbursement  
MEDIA

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 09 / 2014

Amount of Each Disbursement this Period

47313.75
----------

Transaction ID : SB17.I694

**C. SUDDENLINK**

Mailing Address PO BOX 1220

City	State	Zip Code
SCOTT DEPOT	WV	25560

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 04 / 2014

Amount of Each Disbursement this Period

109.53
--------

Transaction ID : SB17.I655

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

123920.78

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. TARGETED CREATIVE COMMUNICATIONS, INC.**

Mailing Address 106 S. COLUMBUS ST.

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
TELEPHONE TOWNHALL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

3600.00
---------

Transaction ID : SB17.I661

**B. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD.

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

360.10
--------

Transaction ID : SB17.I686

**C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD.

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

Amount of Each Disbursement this Period

18.91
-------

Transaction ID : SB17.I691

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3979.01

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 62 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2014

Amount of Each Disbursement this Period

2450.00
---------

Transaction ID : SB17.I648

**B. USPS**

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

2793.00
---------

Transaction ID : SB17.I659

**C. USPS**

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

1979.99
---------

Transaction ID : SB17.I667

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7222.99

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 67

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. VERIZON**

Mailing Address PO BOX 4003

City	State	Zip Code
ACWORTH	GA	30101

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 04 / 2014

Amount of Each Disbursement this Period

203.89
--------

Transaction ID : SB17.I657

**B. WEIS MARKETS**

Mailing Address 217 OAK LEE DR. #15

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 01 / 2014

Amount of Each Disbursement this Period

24.92
-------

Transaction ID : SB17.I676

**C. BERKELEY COUNT REPUBLICAN CLUB**

Mailing Address 724 LAKEVIEW DR.

City	State	Zip Code
MARTINSBURG	WV	25401

Purpose of Disbursement  
DINNER

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 04 / 2014

Amount of Each Disbursement this Period

70.00
-------

Transaction ID : SB17.I653

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

298.81





# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 65 OF 67

☐ 17 ☒ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

## **A. WESTVIRGINIANS BRIGHTER FUTURE**

Mailing Address 500 CUMMINTS CENTER

City State Zip Code  
**BEVERLY MA 01915**

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
**10 06 2014**

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB18.I573

Category/  
Type

## **B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/  
Type

## **C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

2000.00



**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 67 OF 67

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mooney for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Conquest Communications Group**

Nature of Debt (Purpose):

Primary

Mailing Address 2812 Emerywood Pky Ste.103

City State

Zip Code

Richmond

VA

23294

Outstanding Balance Beginning This Period

20289.00

Transaction ID : 2

Amount Incurred This Period

20289.00

Payment This Period

16000.00

Outstanding Balance at Close of This Period

4289.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Targeted Creative Communications, Inc.**

Nature of Debt (Purpose):

Primary

Mailing Address 106 S. Columbus St.

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

20000.00

Transaction ID : 1

Amount Incurred This Period

20000.00

Payment This Period

15000.00

Outstanding Balance at Close of This Period

5000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

9289.00

2) **TOTALS** This Period (last page this line number only) ..... ▶

9289.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

9289.00